2003-04. The increase in outlay effected by Government of Maharashtra during 2003-04, if any, has not been finalised.

Outbreak of Japanese Encephalitis

1542. SHRI THENNALA G. BALAKRISHNA PILLAI:
SHRI N.R. DASARI: SHRI K. RAHMAN KHAN:
DR. DASARI NARAYANA RAO:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that the 'Japanese Encephalitis' is spreading all over the country, especially in the Southern States;

(b) the action taken to prevent spread of this disease;

(c) the number of deaths occurred due to this disease during the last three years, State-wise and year-wise;

(d) whether Government have conducted any studies in this regard; and

(e) if so, the outcome thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) Yes, Sir. A number of deaths have been reported from some districts of Andhra Pradesh, Maharashtra and other parts of the country due to outbreak of Viral Encephalitis.

(b) While control of outbreaks is the responsibility of the respective State Governments, Government of India has provided technical support by sending expert teams to the affected States. Support has also been provided for laboratory confirmation for diagnosis of the outbreaks. In addition to the insecticides and larvicides already provided under the National Anti Malaria Programme, arrangements have been made for additional supply of Malathion (Technical) for fogging and larvicides for use in affected areas of Andhra Pradesh.

An amount of Rs. 83.60 lakhs has been released to the State Malaria Control Society, Andhra Pradesh under the Enhanced Malaria Control Project with World Bank support during this year.

Situation is being monitored by both National Institute of Communicable Diseases (NICD), Delhi and Dte. of National Anti Malaria Programme (NAMP), Delhi in these States.

(c) A statement showing number of deaths due to Viral Encephalitis during the last 3 years, State-wise, is enclosed (See below).

(d) and (e) Two central teams have visited the affected areas in Andhra Pradesh for investigations and technical support.

Teams from the National Institute of Communicable Diseases (NICD), New Delhi and from the National Institute of Virology (NIV), Pune have also visited the outbreak affected areas. Laboratory reports from NICD and NIV indicate that the outbreaks in Andhra Pradesh and Maharashtra are due to viral encephalitis.

The Government of India deputed another team of 10 Pediatricians from Dr. R.M.L. Hospital, Safdarjung Hospital and Kalawati Saran Children Hospital, Delhi to visit Andhra Pradesh. Their findings indicate that the clinical picture was compatible with viral encephalitis.

Statement

Statement showing number of deaths due to encephalitis, State-wise, during 2000, 2001 *and* 2002

SI.No.	State	2000	2001	2002
1.	Andhra Pradesh	72	4	3
2.	Assam	69	200	150
3.	Bihar	19	11	1
4.	Chandigarh	0	0	0
5.	Delhi	0	0	0
6.	Goa	3	2	0
7.	Gujarat	0	0	0

SI.No	State	2000	2001	2002
8.	Haryana	43	22	40
9.	Karnataka	45	14	15
10.	Kerala	2	5	0
11.	Maharashtra	0	1	16
12.	Manipur	0	0	1
13.	Punjab	0	0	2
14.	Tamil Nadu	0	0	0
15.	Uttar Pradesh	253	199	133
16.	West Bengal	50	21	0
	GRAND TOTAL:	556	479	361

Non-availability of medicine at CGHS dispensaries

1543. SHRI GHULAM NABI AZAD:
SHRI VIJAY J. DARDA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of the plethora of complaints from the CGHS beneficiaries, especially from Delhi, about non availability of medicines at CGHS dispensaries as well as the empanelled chemists and authorized chemists supplying medicines of different brands than those prescribed by the CGHS doctors;

(b) if so, the steps taken to redress these grievances; and

(c) the steps taken to ensure adequate availability of prescribed medicines in the dispensaries and the authorized chemists supply only prescribed medicines?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) to (c) CGHS Delhi caters to more than 19 lakhs beneficiaries. Adequate stocks of medicines are available in the dispensaries. The medicines not available in the